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A bill to be entitled An act relating to the Department of Health; amending s. 381.4018, F.S.; authorizing the Department of Health to adopt rules to implement a federal program to further encourage qualified physicians to relocate to and practice in underserved areas; amending s. 456.013, F.S.; revising health care practitioner licensure application requirements; amending s. 456.024, F.S.; revising licensure eligibility requirements; amending s. 458.309, F.S.; deleting a provision requiring certain physicians to register the office with the Department of Health; removing departmental responsibilities; creating s. 458.3266, F.S.; providing definitions; requiring office surgery centers to register with the Department of Health under certain circumstances; providing registration requirements; providing responsibilities for office surgery center physicians; requiring the department to inspect office surgery centers; providing an exception; providing rulemaking authority to the Board of Medicine; providing penalties; amending s. 459.005, F.S.; deleting a provision requiring certain physicians to register the office with the Department of Health; removing departmental responsibilities; creating s. 459.0138, F.S.; providing definitions;

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requiring office surgery centers to register with the Department of Health under certain circumstances; providing registration requirements; providing responsibilities for office surgery center physicians; requiring the department to inspect office surgery centers; providing an exception; providing rulemaking authority to the Board of Medicine; providing penalties; repealing s. 460.4166, F.S., relating to registered chiropractic assistants; amending s. 463.006, F.S.; revising examination requirements for licensure and certification by examination; creating s. 463.0061, F.S.; authorizing licensure of optometry by endorsement and providing requirements therefor; defining the term "active licensed practice of optometry" amending s. 464.006, F.S.; authorizing the board to establish certain standards of care; amending s. 464.202, F.S.; requiring the board to establish discipline and standards of care under the scope of practice of certified nursing assistants; amending s. 464.203, F.S.; revising certification requirements for nursing assistants; amending s. 464.204, F.S.; revising grounds for board-imposed disciplinary sanctions; amending s. 465.019, F.S.; requiring an institutional pharmacy to pass inspection by the board for certain permits; amending s. 465.0193, F.S.;

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requiring a nuclear pharmacy to pass a specified inspection by the department within a specified time before issuance of certain permits; creating s. 465.0195, F.S.; requiring certain pharmacies and outsourcing facilities to obtain a permit in order to create, ship, mail, deliver, or dispense compounded sterile products into this state; providing application requirements; providing inspection requirements; providing permit requirements; authorizing the board to adopt rules; providing applicability; amending s. 465.0196, F.S.; requiring a special pharmacy to pass inspection by the board for certain permits; amending s. 465.0197, F.S.; requiring an Internet pharmacy to pass inspection by the board for certain permits; amending s. 466.006, F.S.; revising certain requirements for examinations completed by applicants seeking dental licensure; amending s. 466.007, F.S.; revising requirements for examinations of a dental hygienist; amending s. 466.017, F.S.; providing adverse incident reporting requirements; defining the term "adverse incident"; providing for disciplinary action by the board; authorizing the Board of Dentistry to adopt rules; repealing s. 466.032, F.S., relating to registration; repealing s. 466.033, F.S., relating to registration

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certificates; repealing s. 466.034, F.S., relating to change of ownership or address; repealing s. 466.035, F.S., relating to advertising; repealing s. 466.036, F.S., relating to information, periodic inspections, and equipment and supplies; repealing s. 466.037, F.S., relating to suspension and revocation and administrative fines; repealing s. 466.038, F.S., relating to rules; repealing s. 466.039, F.S., relating to violations; amending s. 468.701, F.S.; revising a definition; amending s. 468.707, F.S.; revising athletic trainer licensure requirements; amending s. 468.711, F.S.; revising requirements for the renewal of license related to continuing education; amending s. 468.723, F.S.; revising a definition; amending s. 468.803, F.S.; revising orthotic, prosthetic, and pedorthic licensure, registration, and examination requirements; amending s. 480.033, F.S.; revising a definition; amending s. 480.041, F.S.; revising qualifications for licensure as a massage therapist; repealing s. 480.042, F.S., relating to examinations; amending s. 480.046, F.S.; revising instances under which disciplinary action may be taken against massage establishments; amending s. 483.824, F.S.; revising qualification requirements for a clinical laboratory director; amending s. 490.003,

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	F.S.; revising definitions; amending s. 490.005, F.S.;
	revising examination requirements for licensure of a
	psychologist; amending s. 490.006, F.S.; revising
	requirements for licensure by endorsement of certain
	psychologists; amending s. 491.0045, F.S.; providing
	an exemption for intern registration requirements
	under certain circumstances; amending s. 491.005,
	F.S.; revising education requirements for the
	licensure of marriage and family therapists; revising
	examination requirements for the licensure of mental
	health counselors; amending s. 491.006, F.S.; revising
	requirements for licensure or certification by
	endorsement for certain professions; amending s.
	491.007, F.S.; removing a biennial intern registration
	fee; amending s. 491.009, F.S.; authorizing the Board
	of Clinical Social Work, Marriage and Family Therapy,
	and Mental Health Counseling to enter an order denying
	licensure or imposing penalties against an applicant
	for licensure under certain circumstances; providing
	penalties; amending ss. 463.0057, 491.0046, and
	945.42, F.S.; conforming provisions to changes made by
	the act; providing an effective date.
I	t Enacted by the Legislature of the State of Florida:

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Section 1. Paragraph (f) of subsection (3) of section 381.4018, Florida Statutes, is amended to read:

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381.4018 Physician workforce assessment and development.-

- (3) GENERAL FUNCTIONS.—The department shall maximize the use of existing programs under the jurisdiction of the department and other state agencies and coordinate governmental and nongovernmental stakeholders and resources in order to develop a state strategic plan and assess the implementation of such strategic plan. In developing the state strategic plan, the department shall:
- Develop strategies to maximize federal and state (f) programs that provide for the use of incentives to attract physicians to this state or retain physicians within the state. Such strategies should explore and maximize federal-state partnerships that provide incentives for physicians to practice in federally designated shortage areas. Strategies shall also consider the use of state programs, such as the Medical Education Reimbursement and Loan Repayment Program pursuant to s. 1009.65, which provide for education loan repayment or loan forgiveness and provide monetary incentives for physicians to relocate to underserved areas of the state. To further encourage qualified physicians to relocate to and practice in underserved areas, the department, following federal requirements, shall adopt any rules necessary for the implementation of the Conrad 30 Waiver Program established under s. 214(1) of the Immigration

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## and Nationality Act.

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Section 2. Paragraph (a) of subsection (1) of section 456.013, Florida Statutes, is amended to read:

456.013 Department; general licensing provisions.-

(1) (a) Any person desiring to be licensed in a profession within the jurisdiction of the department shall apply to the department in writing to take the licensure examination. The application shall be made on a form prepared and furnished by the department. The application form must be available on the World Wide Web and the department may accept electronically submitted applications beginning July 1, 2001. The application shall require the social security number and date of birth of the applicant, except as provided in paragraphs (b) and (c). The form shall be supplemented as needed to reflect any material change in any circumstance or condition stated in the application which takes place between the initial filing of the application and the final grant or denial of the license and which might affect the decision of the department. If an application is submitted electronically, the department may require supplemental materials, including an original signature of the applicant and verification of credentials, to be submitted in a nonelectronic format. An incomplete application shall expire 1 year after initial filing. In order to further the economic development goals of the state, and notwithstanding any law to the contrary, the department may enter into an

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agreement with the county tax collector for the purpose of appointing the county tax collector as the department's agent to accept applications for licenses and applications for renewals of licenses. The agreement must specify the time within which the tax collector must forward any applications and accompanying application fees to the department.

Section 3. Paragraphs (a) and (b) of subsection (3) and paragraph (j) of subsection (4) of section 456.024, Florida Statutes, are amended to read:

456.024 Members of Armed Forces in good standing with administrative boards or the department; spouses; licensure.—

- (3) (a) A person is eligible for licensure as a health care practitioner in this state if he or she:
- 1. Serves or has served as a health care practitioner in the United States Armed Forces, the United States Reserve Forces, or the National Guard;
- 2. Serves or has served on active duty with the United States Armed Forces as a health care practitioner in the United States Public Health Service; or
- 3. Is a health care practitioner, other than a dentist, in another state, the District of Columbia, or a possession or territory of the United States and is the spouse of a person serving on active duty with the United States Armed Forces.

The department shall develop an application form, and each

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board, or the department if there is no board, shall waive the application fee, licensure fee, and unlicensed activity fee for such applicants. For purposes of this subsection, "health care practitioner" means a health care practitioner as defined in s. 456.001 and a person licensed under part III of chapter 401 or part IV of chapter 468.

- (b) The board, or the department if there is no board, shall issue a license to practice in this state to a person who:
  - 1. Submits a complete application.

- 2. If he or she is a member of the United States Armed Forces, the United States Reserve Forces, or the National Guard, submits proof that he or she has received an honorable discharge within 6 months before, or will receive an honorable discharge within 6 months after, the date of submission of the application.
- 3.a. Holds an active, unencumbered license issued by another state, the District of Columbia, or a possession or territory of the United States and who has not had disciplinary action taken against him or her in the 5 years preceding the date of submission of the application;
- b. Is a military health care practitioner in a profession for which licensure in a state or jurisdiction is not required to practice in the United States Armed Forces, if he or she submits to the department evidence of military training or experience substantially equivalent to the requirements for

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licensure in this state in that profession and evidence that he or she has obtained a passing score on the appropriate examination of a national or regional standards organization if required for licensure in this state; or

- c. Is the spouse of a person serving on active duty in the United States Armed Forces and is a health care practitioner in a profession, excluding dentistry, for which licensure in another state or jurisdiction is not required, if he or she submits to the department evidence of training or experience substantially equivalent to the requirements for licensure in this state in that profession and evidence that he or she has obtained a passing score on the appropriate examination of a national or regional standards organization if required for licensure in this state.
- 4. Attests that he or she is not, at the time of submission of the application, the subject of a disciplinary proceeding in a jurisdiction in which he or she holds a license or by the United States Department of Defense for reasons related to the practice of the profession for which he or she is applying.
- 5. Actively practiced the profession for which he or she is applying for the 3 years preceding the date of submission of the application.
- 6. Submits a set of fingerprints for a background screening pursuant to s. 456.0135, if required for the

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profession for which he or she is applying.

The department shall verify information submitted by the applicant under this subsection using the National Practitioner Data Bank.

(4)

(j) An applicant who is issued a temporary professional license to practice as a dentist pursuant to this section must practice under the indirect supervision, as defined in s. 466.003, of a dentist licensed pursuant to chapter 466.

Section 4. Subsection (3) of section 458.309, Florida Statutes, is amended to read:

458.309 Rulemaking authority.-

which more than 1,000 cubic centimeters of supernatant fat is removed, level 2 procedures lasting more than 5 minutes, and all level 3 surgical procedures in an office setting must register the office with the department unless that office is licensed as a facility under chapter 395. The department shall inspect the physician's office annually unless the office is accredited by a nationally recognized accrediting agency or an accrediting organization subsequently approved by the Board of Medicine. The actual costs for registration and inspection or accreditation shall be paid by the person seeking to register and operate the office setting in which office surgery is performed.

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276	Section 5. Section 458.3266, Florida Statutes, is created
277	to read:
278	458.3266 Office surgery centers
279	(1) DEFINITIONS.—As used in this section, the term:
280	(a) "Designated physician" means a physician licensed
281	under this chapter or chapter 459 that practices at the office
282	surgery center location for which the physician has assumed
283	responsibility for complying with all requirements related to
284	registration and operation of the center in this section and
285	rules of the board.
286	(b) "Office surgery center" means any facility where a
287	physician performs liposuction procedures in which more than
288	1,000 cubic centimeters of supernatant fat are removed, level $2$
289	procedures lasting more than 5 minutes, and all level 3 surgical
290	procedures in an office setting, or any facility in which
291	surgery is performed outside of any facility licensed under
292	chapter 390 or chapter 395.
293	(2) REGISTRATION.—
294	(a) An office surgery center must register with the
295	department unless the center is:
296	1. Licensed as a facility pursuant to chapter 395; or
297	2. Affiliated with an accredited medical school at which
298	training is provided for medical students, residents, or
299	fellows.

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Office surgery center locations shall be registered

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(b)

separately regardless of whether the center is operated under the same business name or management as another center. The actual costs for registration shall be paid by the person seeking to register and operate the office center in which office surgery is performed.

- (c) As a part of registration, an office surgery center must have a designated physician. Within 10 days after termination of a designated physician, the center must notify the department of the identity of another designated physician for that center. Failing to have a designated physician practicing at the location of the registered center may result in the suspension of the center's certificate of registration, as described in s. 456.073(8) or agency action under s. 120.60(6).
- (d) The department shall deny registration to an office surgery center that is:
- 1. Not fully owned by a physician licensed under this chapter or chapter 459 or a group of physicians licensed under this chapter or chapter 459;
- 2. Not a health care center licensed under part X of chapter 400; or
- 3. Owned by or in any contractual or employment relationship with a physician licensed under this chapter or chapter 459 who:
  - a. Had hospital privileges revoked in the last 5 years.

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b.	Does	not	have	а	clear	and	active	license	with	the
departme	ent; o	<u>r</u>								

- c. Had a license disciplined by the department or another jurisdiction in the last 5 years for an offense related to standard of care.
- (e) If the department finds that an office surgery center does not meet the requirements of paragraph (c) or is owned, directly or indirectly, by a person meeting criteria listed in paragraph (d), the department shall revoke the certificate of registration previously issued by the department.
- (f) The department may revoke the office surgery center's certificate of registration and prohibit all physicians associated with the center from practicing at that location based upon an annual inspection and evaluation of the factors described in subsection (4).
- (g) If the certificate of registration is revoked or suspended, the designated physician of the center, the owner or lessor of the center property, the manager, and the proprietor shall:
- 1. Cease to operate the facility as an office surgery center as of the effective date of the suspension or revocation.
- 2. Be responsible for removing all signs and symbols identifying the premises as an office surgery center.
- (h) Upon the effective date of the suspension or revocation, the designated physician of the office surgery

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medicinal drugs located on the premises. The disposition is subject to the supervision and approval of the department.

Medicinal drugs that are purchased or held by a center that is not registered may be deemed adulterated pursuant to s. 499.006.

- (i) If the office surgery center's registration is revoked, any person named in the registration documents of the center, including persons owning or operating the center, may not, as an individual or as a part of a group, apply to operate an office surgery center for 5 years after the date the registration is revoked.
- (j) The period of suspension for the registration of an office surgery center shall be prescribed by the department, but may not exceed 2 years.
- (k) A change of ownership of a registered office surgery center requires submission of a new registration application. An office surgery registration may not be transferred.
- (3) PHYSICIAN RESPONSIBILITIES.—These responsibilities apply to any physician who provides professional services in an office surgery center as required in subsection (2).
- (a)1. A physician may not practice medicine in an office surgery center, as described in subsection (5), if the office surgery center is not registered with the department as required by this section. A physician who violates this paragraph is subject to disciplinary action by his or her appropriate medical

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## regulatory board.

- 2. Surgical procedures performed in an office surgery center may not include any procedure that may result in blood loss of more than 10 percent of estimated blood volume in a patient with a normal hemoglobin; require major or prolonged intracranial, intrathoracic, abdominal, or major joint replacement procedures, except for laparoscopic procedures; involve major blood vessels performed with direct visualization by open exposure of the major vessel, except for percutaneous endovascular intervention; or are generally emergent or life threatening in nature.
- (b) The designated physician of an office surgery center shall notify the applicable board in writing of the date of termination of employment within 10 days after terminating his or her employment with a center registered under subsection (2). Each physician practicing in an office surgery center shall advise the board, in writing, within 10 calendar days after beginning or ending his or her practice at an office surgery center.
- (c) Each physician practicing in an office surgery center is responsible for ensuring compliance with the following:
- 1. Facility and physical operations requirements,
  including:
- a. An office surgery center which shall be located and operated at a publicly accessible fixed location.

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401	b. The public display of a visible printed sign that
402	clearly identifies the name, hours of operations, and the street
403	address of the center.
404	c. Maintaining a publicly listed telephone number and
405	other methods of communication available to the public.
406	d. Emergency lighting and communications.
407	e. A reception and waiting area.
408	f. A restroom.
409	g. An administrative area, including room for storage of
410	medical records, supplies, and equipment.
411	h. Private patient examination rooms.
412	i. Treatment rooms, if treatment is being provided to the
413	patients.
414	j. The public display of a visible printed sign located in
415	a conspicuous place in the waiting room with the name and
416	contact information of the center's designated physician and the
417	names of all physicians practicing in the center.
418	k. Compliance with ss. 499.0121 and 893.07, if the center
419	stores and dispenses prescription drugs.
420	2. Infection control requirements, including:
421	a. The maintenance of equipment and supplies to support
422	infection prevention and control activities.
423	b. The identification of infection risks that shall be
424	based on the following:
421 422 423	a. The maintenance of equipment and supplies to support infection prevention and control activities.  b. The identification of infection risks that shall be

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Geographic location, community, and population served.

CODING: Words stricken are deletions; words underlined are additions.

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(I)

426	(II) The provided care, treatment, and services.
427	(III) An analysis of its infection surveillance and
428	control data.
429	c. Center maintenance of written infection prevention
430	policies and procedures that address prioritized risks and limit
431	the following:
432	(I) Unprotected exposure to pathogens.
433	(II) Transmission of infections associated with procedures
434	performed in the center.
435	(III) Transmission of infections associated with the
436	center's use of medical equipment, devices, and supplies.
437	3. Health and safety requirements, including:
438	a. Being structurally sound, in good repair, clean, and
439	free from health and safety hazards, including its grounds,
440	buildings, furniture, appliances, and equipment.
441	b. Having evacuation procedures in the event of an
442	emergency, which shall include provisions for the evacuation of
443	disabled patients and employees.
444	c. Having a written facility-specific disaster plan
445	setting forth actions that will be taken in the event of center
446	closure due to unforeseen disasters and shall include provisions
447	for the protection of medical records and any controlled
448	substances.
449	d. Having at least one employee on the premises during

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patient care hours who is certified in Basic Life Support and is

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trained in reacting to accidents and medical emergencies until emergency medical personnel arrive.

- (d) The designated physician of an office surgery center
  is responsible for ensuring the center complies with the
  following quality assurance requirements:
- 1. The center shall maintain an ongoing quality assurance program that objectively and systematically monitors and evaluates the quality and appropriateness of patient care, evaluates methods to improve patient care, identifies and corrects deficiencies within the facility, alerts the designated physician to identify and resolve recurring problems, and provides for opportunities to improve the facility's performance and to enhance and improve the quality of care provided to the public.
- 2. The designated physician shall establish a quality assurance program that includes the following components:
- a. Identification, investigation, and analysis of the frequency and causes of adverse incidents to patients.
  - b. Identification of trends or patterns of incidents.
- c. Development of measures to correct, reduce, minimize, or eliminate the risk of adverse incidents to patients.
- d. Documentation of the functions provided in this subparagraph and periodic review no less than quarterly of such information by the designated physician.
  - (e) The designated physician for each office surgery

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center shall report all adverse incidents to the department as set forth in s. 458.351.

- This section does not excuse a physician from providing any treatment or performing any medical duty without the proper equipment and materials as required by the standard of care or rules adopted by the board. This section does not supersede the level of care, skill, and treatment recognized in general law related to health care licensure.
  - (4) INSPECTION.—
- (a) The department shall inspect the office surgery center annually, including a review of the patient records, to ensure that it complies with this section and the rules of the board adopted pursuant to subsection (5) unless the center is accredited by a nationally recognized accrediting agency or an accrediting organization approved by the board.
- (b) The actual costs for inspection or accreditation shall be paid by the person seeking to register and operate the office center in which office surgery is performed.
- (c) During an onsite inspection, the department shall make a reasonable attempt to discuss each violation with the owner or designated physician of the office surgery center before issuing a formal written notification.
- (d) Any action taken to correct a violation shall be documented in writing by the owner or designated physician of

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the office surgery center and verified by follow-up visits by departmental personnel.

- (5) RULEMAKING.—The board shall adopt rules:
- (a) Necessary to administer the registration and inspection of office surgery centers which establish the specific requirements, procedures, forms, and fees.
- (b) Setting forth training requirements for all facility health care practitioners who are not regulated by another board.
  - (6) PENALTIES; ENFORCEMENT.-

- (a) The department may impose an administrative fine on an office surgery center of up to \$5,000 per violation for violating the requirements of this section; chapter 499, the Florida Drug and Cosmetic Act; 21 U.S.C. ss. 301-392, the Federal Food, Drug, and Cosmetic Act; 21 U.S.C. ss. 821 et seq., the Comprehensive Drug Abuse Prevention and Control Act; chapter 893, the Florida Comprehensive Drug Abuse Prevention and Control Act; or the rules of the department.
- (b) In determining whether a penalty is to be imposed upon a center, and in determining the amount of the fine, the department shall consider the following factors:
- 1. The gravity of the violation, including the probability that death or serious physical or emotional harm to a patient has resulted, or could have resulted, from the center's actions or the actions of the physician, the severity of the action or

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526 potential harm, and the extent to which the provisions of the 527 applicable laws or rules were violated.

- 2. What actions, if any, the owner or designated physician took to correct the violations.
- $\underline{\mbox{3.}}$  Whether there were any previous violations at the center.
- 4. The financial benefits that the center derived from committing or continuing to commit the violation.
- (c) Each day a violation continues after the date fixed for termination of the violation as ordered by the department constitutes an additional, separate, and distinct violation.
- (d) The department may impose a fine and, in the case of an owner-operated office surgery center, revoke or deny a center's registration if the center's designated physician knowingly and intentionally misrepresents actions taken to correct a violation.
- (e) An owner or designated physician of an office surgery center who concurrently operates an unregistered center is subject to an administrative fine of \$5,000 per day.
- (f) If the owner of an office surgery center that requires registration fails to apply to register the center upon a change of ownership and operates the center under the new ownership, the owner is subject to a fine of \$10,000.
- Section 6. Subsection (2) of section 459.005, Florida Statutes, is amended to read:

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(2) A physician who performs liposuction procedures in
which more than 1,000 cubic centimeters of supernatant fat is
removed, level 2 procedures lasting more than 5 minutes, and all
level 3 surgical procedures in an office setting must register
the office with the department unless that office is licensed as
a facility under chapter 395. The department shall inspect the

558 physician's office annually unless the office is accredited by a
559 nationally recognized accrediting agency or an accrediting

organization subsequently approved by the Board of Osteopathic Medicine. The actual costs for registration and inspection or

accreditation shall be paid by the person seeking to register

and operate the office setting in which office surgery is performed.

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Section 7. Section 459.0138, Florida Statutes, is created to read:

459.0138 Office surgery centers.-

459.005 Rulemaking authority.-

- (1) DEFINITIONS.—As used in this section, the term:
- (a) "Designated physician" means a physician licensed under this chapter or chapter 459 that practices at the office surgery center location for which the physician has assumed responsibility for complying with all requirements related to registration and operation of the center in this section and rules of the board.
  - (b) "Office surgery center" means any facility where a

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physician performs liposuction procedures in which more than 1,000 cubic centimeters of supernatant fat are removed, level 2 procedures lasting more than 5 minutes, and all level 3 surgical procedures in an office setting, or any facility in which surgery is performed outside of any facility licensed under chapter 390 or chapter 395.

(2) REGISTRATION. -

- (a) An office surgery center must register with the department unless the center is:
  - 1. Licensed as a facility pursuant to chapter 395; or
- 2. Affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows.
- (b) Office surgery center locations shall be registered separately regardless of whether the center is operated under the same business name or management as another center. The actual costs for registration shall be paid by the person seeking to register and operate the office center in which office surgery is performed.
- (c) As a part of registration, an office surgery center must have a designated physician. Within 10 days after termination of a designated physician, the center must notify the department of the identity of another designated physician for that center. Failing to have a designated physician practicing at the location of the registered center may result

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601	in the suspension of the center's certificate of registration as
602	described in s. 456.073(8) or agency action under s. 120.60(6).
603	(d) The department shall deny registration to an office
604	surgery center that is:
605	1. Not fully owned by a physician licensed under this
606	chapter or chapter 459 or a group of physicians licensed under
607	this chapter or chapter 459;
608	2. Not a health care center licensed under part X of
609	chapter 400; or
610	3. Owned by or any contractual or employment relationship
611	with a physician licensed under this chapter or chapter 459 who:
612	a. Had hospital privileges revoked in the last 5 years.
613	b. Does not have a clear and active license with the
614	department; or
615	c. Had a license disciplined by the department or another
616	jurisdiction in the last 5 years for an offense related to
617	standard of care.
618	(e) If the department finds that an office surgery center
619	does not meet the requirements of paragraph (c) or is owned,
620	directly or indirectly, by a person meeting criteria listed in
621	paragraph (d), the department shall revoke the certificate of
622	registration previously issued by the department.
623	(f) The department may revoke the office surgery center's
624	certificate of registration and prohibit all physicians

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associated with the center from practicing at that location

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based upon an annual inspection and evaluation of the factors described in subsection (4).

- (g) If the registration is revoked or suspended, the designated physician of the center, the owner or lessor of the center property, the manager, and the proprietor shall:
- 1. Cease to operate the facility as an office surgery center as of the effective date of the suspension or revocation.
- 2. Be responsible for removing all signs and symbols identifying the premises as an office surgery center.
- (h) Upon the effective date of the suspension or revocation, the designated physician of the office surgery center shall advise the department of the disposition of the medicinal drugs located on the premises. The disposition is subject to the supervision and approval of the department.

  Medicinal drugs that are purchased or held by a center that is not registered may be deemed adulterated pursuant to s. 499.006.
- (i) If the office surgery center's registration is revoked, any person named in the registration documents of the center, including persons owning or operating the center, may not, as an individual or as a part of a group, apply to operate an office surgery center for 5 years after the date the registration is revoked.
- (j) The period of suspension for the registration of an office surgery center shall be prescribed by the department, but may not exceed 2 years.

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(k) A change of ownership of a registered office surgery center requires submission of a new registration application. An office surgery registration may not be transferred.

- (3) PHYSICIAN RESPONSIBILITIES.—These responsibilities apply to any physician who provides professional services in an office surgery center as required in subsection (2).
- (a)1. A physician may not practice medicine in an office surgery center, as described in subsection (5), if the office surgery center is not registered with the department as required by this section. A physician who violates this paragraph is subject to disciplinary action by his or her appropriate medical regulatory board.
- 2. Surgical procedures performed in an office surgery center may not include any procedure that may result in blood loss of more than 10 percent of estimated blood volume in a patient with a normal hemoglobin; require major or prolonged intracranial, intrathoracic, abdominal, or major joint replacement procedures, except for laparoscopic procedures; involve major blood vessels performed with direct visualization by open exposure of the major vessel, except for percutaneous endovascular intervention; or are generally emergent or life threatening in nature.
- (b) The designated physician of an office surgery center shall notify the applicable board in writing of the date of termination of employment within 10 days after terminating his

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676	or her employment with a center registered under subsection (2).
677	Each physician practicing in an office surgery center shall
678	advise the board, in writing, within 10 calendar days after
679	beginning or ending his or her practice at an office surgery
680	center.
681	(c) Each physician practicing in an office surgery center
682	is responsible for ensuring compliance with the following:
683	1. Facility and physical operations requirements,
684	including:
685	a. An office surgery center which shall be located and
686	operated at a publicly accessible fixed location.
687	b. The public display of a visible printed sign that
688	clearly identifies the name, hours of operations, and the street
689	address of the center.
690	c. Maintaining a publicly listed telephone number and
691	other methods of communication available to the public.
692	d. Emergency lighting and communications.
693	e. A reception and waiting area.
694	f. A restroom.
695	g. An administrative area, including room for storage of
696	medical records, supplies, and equipment.
697	h. Private patient examination rooms.
698	i. Treatment rooms, if treatment is being provided to the
699	<pre>patients.</pre>
700	j. The public display of a visible printed sign located in

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CODING: Words stricken are deletions; words underlined are additions.

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701	a conspicuous place in the waiting room with the name and
702	contact information of the center's designated physician and the
703	names of all physicians practicing in the center.
704	k. Compliance with ss. 499.0121 and 893.07, if the center
705	stores and dispenses prescription drugs.
706	2. Infection control requirements, including:
707	a. The maintenance of equipment and supplies to support
708	infection prevention and control activities.
709	b. The identification of infection risks that shall be
710	based on the following:
711	(I) Geographic location, community, and population served.
712	(II) The provided care, treatment, and services.
713	(III) An analysis of its infection surveillance and
714	control data.
715	c. Center maintenance of written infection prevention
716	policies and procedures that address prioritized risks and limit
717	the following:
718	(I) Unprotected exposure to pathogens.
719	(II) Transmission of infections associated with procedures
720	performed in the center.
721	(III) Transmission of infections associated with the
722	center's use of medical equipment, devices, and supplies.
723	3. Health and safety requirements, including:
724	a. Being structurally sound, in good repair, clean, and

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free from health and safety hazards, including its grounds,

726 buildings, furniture, appliances, and equipment.

- b. Having evacuation procedures in the event of an emergency, which shall include provisions for the evacuation of disabled patients and employees.
- c. Having a written facility-specific disaster plan setting forth actions that will be taken in the event of center closure due to unforeseen disasters and shall include provisions for the protection of medical records and any controlled substances.
- d. Having at least one employee on the premises during patient care hours who is certified in Basic Life Support and is trained in reacting to accidents and medical emergencies until emergency medical personnel arrive.
- (d) The designated physician of an office surgery center is responsible for ensuring the center complies with the following quality assurance requirements:
- 1. The center shall maintain an ongoing quality assurance program that objectively and systematically monitors and evaluates the quality and appropriateness of patient care, evaluates methods to improve patient care, identifies and corrects deficiencies within the facility, alerts the designated physician to identify and resolve recurring problems, and provides for opportunities to improve the facility's performance and to enhance and improve the quality of care provided to the public.

2.	The	desig	gnated	physici	an s	hall	estab]	lish	а	quality
assurance	pro	gram	that	includes	the	foli	lowing	comp	or	nents:

- <u>a. Identification, investigation, and analysis of the</u> frequency and causes of adverse incidents to patients.
  - b. Identification of trends or patterns of incidents.
- c. Development of measures to correct, reduce, minimize, or eliminate the risk of adverse incidents to patients.
- d. Documentation of the functions provided in this subparagraph and periodic review no less than quarterly of such information by the designated physician.
- (e) The designated physician for each office surgery center shall report all adverse incidents to the department as set forth in s. 458.351.

This section does not excuse a physician from providing any treatment or performing any medical duty without the proper equipment and materials as required by the standard of care or rules adopted by the board. This section does not supersede the level of care, skill, and treatment recognized in general law related to health care licensure.

(4) INSPECTION.-

(a) The department shall inspect the office surgery center annually, including a review of the patient records, to ensure that it complies with this section and the rules of the board adopted pursuant to subsection (5) unless the center is

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accredited by a nationally recognized accrediting agency approved by the board.

- (b) The actual costs for inspection or accreditation shall be paid by the person seeking to register and operate the office center in which office surgery is performed.
- (c) During an onsite inspection, the department shall make a reasonable attempt to discuss each violation with the owner or designated physician of the office surgery center before issuing a formal written notification.
- (d) Any action taken to correct a violation shall be documented in writing by the owner or designated physician of the office surgery center and verified by follow-up visits by departmental personnel.
  - (5) RULEMAKING.—The board shall adopt rules:
- (a) Necessary to administer the registration and inspection of office surgery centers which establish the specific requirements, procedures, forms, and fees.
- (b) Setting forth training requirements for all facility health care practitioners who are not regulated by another board.
  - (6) PENALTIES; ENFORCEMENT.—
- (a) The department may impose an administrative fine on an office surgery center of up to \$5,000 per violation for violating the requirements of this section; chapter 499, the Florida Drug and Cosmetic Act; 21 U.S.C. ss. 301-392, the

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Federal Food, Drug, and Cosmetic Act; 21 U.S.C. ss. 821 et seq., the Comprehensive Drug Abuse Prevention and Control Act; chapter 893, the Florida Comprehensive Drug Abuse Prevention and Control Act; or the rules of the department.

- (b) In determining whether a penalty is to be imposed upon a center, and in determining the amount of the fine, the department shall consider the following factors:
- 1. The gravity of the violation, including the probability that death or serious physical or emotional harm to a patient has resulted, or could have resulted, from the center's actions or the actions of the physician, the severity of the action or potential harm, and the extent to which the provisions of the applicable laws or rules were violated.
- 2. What actions, if any, the owner or designated physician took to correct the violations.
- 3. Whether there were any previous violations at the center.
- 4. The financial benefits that the center derived from committing or continuing to commit the violation.
- (c) Each day a violation continues after the date fixed for termination of the violation as ordered by the department constitutes an additional, separate, and distinct violation.
- (d) The department may impose a fine and, in the case of an owner-operated office surgery center, revoke or deny a center's registration if the center's designated physician

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knowingly and intentionally misrepresents actions taken to correct a violation.

- (e) An owner or designated physician of an office surgery center who concurrently operates an unregistered center is subject to an administrative fine of \$5,000 per day.
- (f) If the owner of an office surgery center that requires registration fails to apply to register the center upon a change of ownership and operates the center under the new ownership, the owner is subject to a fine of \$10,000.
- Section 8. <u>Section 460.4166, Florida Statutes, is</u> repealed.
- Section 9. Section 463.006, Florida Statutes, is amended to read:
  - 463.006 Licensure and certification by examination.-
- (1) Any person desiring to be a licensed practitioner pursuant to this chapter shall apply to the department to take the licensure and certification examinations. The department shall <u>license</u> examine each applicant who the board determines has:
- (a) Completed the application forms as required by the board, remitted an application fee for certification not to exceed \$250, remitted an examination fee for certification not to exceed \$250, and remitted <u>a</u> an examination fee for licensure not to exceed \$325, all as set by the board.
  - (b) Submitted proof satisfactory to the department that

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- 1. Is at least 18 years of age.
- 2. Has graduated from an accredited school or college of optometry approved by rule of the board.
  - 3. Is of good moral character.
- 3.4. Has successfully completed at least 110 hours of transcript-quality coursework and clinical training in general and ocular pharmacology as determined by the board, at an institution that:
- a. Has facilities for both didactic and clinical instructions in pharmacology; and
- b. Is accredited by a regional or professional accrediting organization that is recognized and approved by the Commission on Recognition of Postsecondary Accreditation or the United States Department of Education.
- 4.5. Has completed at least 1 year of supervised experience in differential diagnosis of eye disease or disorders as part of the optometric training or in a clinical setting as part of the optometric experience.
- 5. Has obtained a passing score, as established by rule of the board, on the licensure examination of the National Board of Examiners in Optometry or a similar nationally recognized examination approved by the board.
- (2) The examination shall consist of the appropriate subjects, including applicable state laws and rules and general

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and ocular pharmacology with emphasis on the use and side effects of ocular pharmaceutical agents. The board may by rule substitute a national examination as part or all of the examination and may by rule offer a practical examination in addition to the written examination.

(2)(3) Each applicant who successfully passes the examination and otherwise meets the requirements of this chapter is entitled to be licensed as a practitioner and to be certified to administer and prescribe ocular pharmaceutical agents in the diagnosis and treatment of ocular conditions.

Section 10. Section 463.0061, Florida Statutes, is created to read:

463.0061 Licensure by endorsement; requirements; fees.—

- (1) Any person desiring to be a licensed practitioner pursuant to this chapter shall apply to the department. The department shall issue a license by endorsement to any applicant who, upon applying to the department on forms furnished by the department and remitting a nonrefundable application fee set by the board not to exceed \$250 and a licensure fee not to exceed \$325, the board certifies:
- (a) Has graduated from an accredited school or college of optometry accredited by a regional or professional accrediting organization that is recognized and approved by the Commission on Recognition of Postsecondary Accreditation or the United States Department of Education.

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(b) Has obtained an overall passing score, as established by rule of the board, on the licensure examination of the National Board of Examiners in Optometry or a similar nationally recognized examination approved by the board.

- (c) Has submitted evidence of an active, licensed practice of optometry in another jurisdiction, for at least 5 of the immediately preceding 7 years, or evidence of successful completion of a board-approved clinical competency examination within the year preceding the filing of an application for licensure. For purposes of this paragraph, "active licensed practice of optometry" means that practice of optometry by optometrists, including those employed by any federal or state governmental entity in community or public health.
- (d) Has successfully completed the clinical skills portion of the examination developed by the National Board of Examiners in Optometry. In addition to an overall passing score on the clinical skills portion, an applicant must obtain a score of 75 percent or better on each of the biomicroscopy, binocular indirect ophthalmoscopy, and dilated biomicroscopy and noncontact fundus lens evaluation skills individually.
- (e) Has successfully completed a written examination on applicable general laws and rules governing the practice of optometry.
- (f) Has obtained a passing score on either the Treatment and Management of Ocular Disease examination in the Patient

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Assessment and Management portion of the examination developed by the National Board of Examiners in Optometry or the stand alone Treatment and Management of Ocular Disease examination developed by the National Board of Examiners in Optometry.

- (2) The applicant shall submit evidence of completing a total of at least 30 hours of board-approved continuing education for the 2 calendar years immediately preceding application.
- endorsement to any applicant who is under investigation in any jurisdiction for an act or offense which would constitute a violation of this chapter until such time as the investigation is complete, at which time the provisions of s. 463.016 shall apply. Furthermore, the department may not issue an unrestricted license to any individual who has committed any act or offense in any jurisdiction constituting the basis for disciplining an optometrist pursuant to s. 463.016. If the board finds that an individual has committed an act or offense constituting the basis for disciplining an optometrist pursuant to s. 463.016, the board may enter an order imposing one or more of the terms set forth in subsection (4).
- (4) When the board determines that an applicant for licensure by endorsement has failed to satisfy each of the appropriate requirements in this section, it may enter an order requiring one or more of the following:

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(a) Refusal to certify to the department an application
for licensure or certification;

- (b) Certify to the department an application for licensure or certification with restrictions on the scope of practice of the licensee; or
- conditions specified by the board, including, but not limited to, requiring the optometrist to submit to treatment, attend continuing education courses, submit to reexamination, or work under the supervision of another licensed optometrist.

Section 11. Section 464.006, Florida Statutes, is amended to read:

464.006 Rulemaking authority.—The board <u>may</u> has authority to adopt rules pursuant to ss. 120.536(1) and 120.54 to implement the provisions of this part conferring duties upon it and establish standards of care.

Section 12. Section 464.202, Florida Statutes, is amended to read:

464.202 Duties and powers of the board.—The board shall maintain, or contract with or approve another entity to maintain, a state registry of certified nursing assistants. The registry must consist of the name of each certified nursing assistant in this state; other identifying information defined by board rule; certification status; the effective date of

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certification; other information required by state or federal law; information regarding any crime or any abuse, neglect, or exploitation as provided under chapter 435; and any disciplinary action taken against the certified nursing assistant. The registry shall be accessible to the public, the certificateholder, employers, and other state agencies. The board shall adopt by rule testing procedures for use in certifying nursing assistants and shall adopt rules regulating the practice of certified nursing assistants, including discipline and establishing standards of care and specifying the scope of practice authorized and the level of supervision required for the practice of certified nursing assistants. The board may contract with or approve another entity or organization to provide the examination services, including the development and administration of examinations. The board shall require that the contract provider offer certified nursing assistant applications via the Internet, and may require the contract provider to accept certified nursing assistant applications for processing via the Internet. The board shall require the contract provider to provide the preliminary results of the certified nursing examination on the date the test is administered. The provider shall pay all reasonable costs and expenses incurred by the board in evaluating the provider's application and performance during the delivery of services, including examination services and procedures for maintaining

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1001 the certified nursing assistant registry.

Section 13. Paragraph (c) of subsection (1) of section 464.203, Florida Statutes, is amended to read:

464.203 Certified nursing assistants; certification requirement.—

- (1) The board shall issue a certificate to practice as a certified nursing assistant to any person who demonstrates a minimum competency to read and write and successfully passes the required background screening pursuant to s. 400.215. If the person has successfully passed the required background screening pursuant to s. 400.215 or s. 408.809 within 90 days before applying for a certificate to practice and the person's background screening results are not retained in the clearinghouse created under s. 435.12, the board shall waive the requirement that the applicant successfully pass an additional background screening pursuant to s. 400.215. The person must also meet one of the following requirements:
- (c) Is currently certified in another state or territory, and the District of Columbia; is listed on that state's certified nursing assistant registry; and has not been found to have committed abuse, neglect, or exploitation in that state.
- Section 14. Subsection (1) of section 464.204, Florida Statutes, is amended to read:
- 1024 464.204 Denial, suspension, or revocation of certification; disciplinary actions.—

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(1) The following acts constitute grounds for which the board may impose disciplinary sanctions as specified in subsection (2):

- (a) Obtaining or attempting to obtain certification or an exemption, or possessing or attempting to possess certification or a letter of exemption, by bribery, misrepresentation, deceit, or through an error of the board.
- (b) Intentionally Violating any provision of this chapter, chapter 456, or the rules adopted by the board.

Section 15. Subsection (7) is added to section 465.019, Florida Statutes, to read:

465.019 Institutional pharmacies; permits.-

inspection by the department as a prerequisite to the issuance of an initial permit or a permit for a change of location. The inspection must be completed within 90 days before the issuance of the permit.

Section 16. Section 465.0193, Florida Statutes, is amended to read:

465.0193 Nuclear pharmacy permits.—Any person desiring a permit to operate a nuclear pharmacy shall apply to the department. If the board certifies that the application complies with applicable law, the department shall issue the permit. No permit shall be issued unless a duly licensed and qualified nuclear pharmacist is designated as being responsible for

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pass an onsite inspection by the department as a prerequisite to the issuance of an initial permit or a permit for a change of location. The inspection must be completed within 90 days before the issuance of the permit. The permittee shall notify the department within 10 days of any change of the licensed pharmacist responsible for the compounding and dispensing of nuclear pharmaceuticals.

Section 17. Section 465.0195, Florida Statutes, is created to read:

- 465.0195 Pharmacy or outsourcing facility; sterile compounding permit.—Before a pharmacy or outsourcing facility located in this state dispenses, creates, delivers, ships, or mails, in any manner, a compounded sterile product, the pharmacy or outsourcing facility must hold a sterile compounding permit.
- (1) An application for a sterile compounding permit shall be submitted on a form furnished by the board. The board may require such information as it deems reasonably necessary to carry out the purposes of this section.
- (2) If the board certifies that the application complies with applicable laws and rules of the board governing pharmacies, the department shall issue the permit.
- (3) A pharmacy or outsourcing facility must pass an onsite inspection by the department as a prerequisite to the issuance of an initial permit or a permit for a change of location. The

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inspection must be completed within 90 days prior to the issuance of the permit. The board may adopt by rule, standards for the conducting of an onsite inspection for issuance of a sterile compounding permit.

- (4) A permit may not be issued unless a licensed pharmacist is designated to undertake the professional supervision of the compounding and dispensing of all drugs dispensed by the permittee.
- (5) A permittee must notify the department within 10 days after any change of the licensed pharmacist under subsection (4). Each permittee that employs or otherwise uses registered pharmacy technicians shall have a written policy and procedures manual specifying those duties, tasks, and functions that a registered pharmacy technician is authorized to perform.
- (6) The board may adopt by rule, standards of practice for sterile compounding. In adopting such rules, the board shall give due consideration to the standards and requirements provided in chapter 797 of the United States Pharmacopeia, or other professionally accepted standards deemed authoritative by the board. In adopting such rules for an outsourcing facility, the board shall consider the standards and requirements of current good manufacturing practices as set forth by federal law and any other professionally accepted standards deemed authoritative by the board.
  - (7) All provisions relating to pharmacy permits found in

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ss. 465.022 and 465.023, are applicable to permits issued pursuant to this section.

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Section 18. Section 465.0196, Florida Statutes, is amended to read:

465.0196 Special pharmacy permits.—Any person desiring a permit to operate a special pharmacy shall apply to the department for a special pharmacy permit. If the board certifies that the application complies with the applicable laws and rules of the board governing the practice of the profession of pharmacy, the department shall issue the permit. A special pharmacy must pass an onsite inspection by the department as a prerequisite to the issuance of an initial permit or a permit for a change of location. The inspection must be completed within 90 days before the issuance of the permit. A permit may not be issued unless a licensed pharmacist is designated to undertake the professional supervision of the compounding and dispensing of all drugs dispensed by the pharmacy. The licensed pharmacist shall be responsible for maintaining all drug records and for providing for the security of the area in the facility in which the compounding, storing, and dispensing of medicinal drugs occurs. The permittee shall notify the department within 10 days after any change of the licensed pharmacist responsible for such duties. Each permittee that employs or otherwise uses registered pharmacy technicians shall have a written policy and procedures manual specifying those duties, tasks, and functions

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that a registered pharmacy technician is allowed to perform.

Section 19. Subsection (2) of section 465.0197, Florida

Statutes, is amended to read:

465.0197 Internet pharmacy permits.-

(2) An Internet pharmacy must obtain a permit under this section to sell medicinal drugs to persons in this state. An Internet pharmacy must pass an onsite inspection by the department as a prerequisite to the issuance of an initial permit or a permit for a change of location. The inspection must be completed within 90 days prior to the issuance of the permit.

Section 20. Subsection (4) of section 466.006, Florida Statutes, is amended to read:

466.006 Examination of dentists.-

- (4) Notwithstanding any other provision of law in chapter 456 pertaining to the clinical dental licensure examination or national examinations, to be licensed as a dentist in this state, an applicant must successfully complete the following:
- (a) A written examination on the laws and rules of the state regulating the practice of dentistry;
- (b)1. A practical or clinical examination, which shall be the American Dental Licensing Examination produced by the American Board of Dental Examiners, Inc., or its successor entity, if any, that is administered in this state and graded by dentists licensed in this state and employed by the department for just such purpose, provided that the board has attained, and

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continues to maintain thereafter, representation on the board of directors of the American Board of Dental Examiners, the examination development committee of the American Board of Dental Examiners, and such other committees of the American Board of Dental Examiners as the board deems appropriate by rule to assure that the standards established herein are maintained organizationally. A passing score on the American Dental Licensing Examination administered in this state and graded by dentists who are licensed in this state is valid for 365 days after the date the official examination results are published.

- 2.a. As an alternative to the requirements of subparagraph 1., an applicant may submit scores from an American Dental Licensing Examination previously administered in a jurisdiction other than this state after October 1, 2011, and such examination results shall be recognized as valid for the purpose of licensure in this state. A passing score on the American Dental Licensing Examination administered out-of-state shall be the same as the passing score for the American Dental Licensing Examination administered in this state and graded by dentists who are licensed in this state. The examination results are valid for 365 days after the date the official examination results are published. The applicant must have completed the examination after October 1, 2011.
- b. This subparagraph may not be given retroactive application.

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- 3. If the date of an applicant's passing American Dental Licensing Examination scores from an examination previously administered in a jurisdiction other than this state under subparagraph 2. is older than 365 days, then such scores shall nevertheless be recognized as valid for the purpose of licensure in this state, but only if the applicant demonstrates that all of the following additional standards have been met:
- a.(I) The applicant completed the American Dental Licensing Examination after October 1, 2011.

- (II) This sub-subparagraph may not be given retroactive application;
- b. The applicant graduated from a dental school accredited by the American Dental Association Commission on Dental Accreditation or its successor entity, if any, or any other dental accrediting organization recognized by the United States Department of Education. Provided, however, if the applicant did not graduate from such a dental school, the applicant may submit proof of having successfully completed a full-time supplemental general dentistry program accredited by the American Dental Association Commission on Dental Accreditation of at least 2 consecutive academic years at such accredited sponsoring institution. Such program must provide didactic and clinical education at the level of a D.D.S. or D.M.D. program accredited by the American Dental Association Commission on Dental Accreditation;

c. The applicant currently possesses a valid and active dental license in good standing, with no restriction, which has never been revoked, suspended, restricted, or otherwise disciplined, from another state or territory of the United States, the District of Columbia, or the Commonwealth of Puerto Rico;

- d. The applicant submits proof that he or she has never been reported to the National Practitioner Data Bank, the Healthcare Integrity and Protection Data Bank, or the American Association of Dental Boards Clearinghouse. This subsubparagraph does not apply if the applicant successfully appealed to have his or her name removed from the data banks of these agencies;
- e.(I) In the 5 years immediately preceding the date of application for licensure in this state, the applicant must submit proof of having been consecutively engaged in the full-time practice of dentistry in another state or territory of the United States, the District of Columbia, or the Commonwealth of Puerto Rico, or, if the applicant has been licensed in another state or territory of the United States, the District of Columbia, or the Commonwealth of Puerto Rico for less than 5 years, the applicant must submit proof of having been engaged in the full-time practice of dentistry since the date of his or her initial licensure.
  - (II) As used in this section, "full-time practice" is

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1226 defined as a minimum of 1,200 hours per year for each and every year in the consecutive 5-year period or, where applicable, the 1227 1228 period since initial licensure, and must include any combination 1229 of the following:

- Active clinical practice of dentistry providing direct patient care.
- Full-time practice as a faculty member employed by a dental or dental hygiene school approved by the board or accredited by the American Dental Association Commission on Dental Accreditation.
- Full-time practice as a student at a postgraduate dental education program approved by the board or accredited by the American Dental Association Commission on Dental Accreditation.
- The board shall develop rules to determine what type (III) of proof of full-time practice is required and to recoup the cost to the board of verifying full-time practice under this section. Such proof must, at a minimum, be:
- Admissible as evidence in an administrative (A) proceeding;
  - Submitted in writing; (B)

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- Submitted by the applicant under oath with penalties (C) of perjury attached;
- Further documented by an affidavit of someone 1250 unrelated to the applicant who is familiar with the applicant's

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practice and testifies with particularity that the applicant has been engaged in full-time practice; and

- (E) Specifically found by the board to be both credible and admissible.
- (IV) An affidavit of only the applicant is not acceptable proof of full-time practice unless it is further attested to by someone unrelated to the applicant who has personal knowledge of the applicant's practice. If the board deems it necessary to assess credibility or accuracy, the board may require the applicant or the applicant's witnesses to appear before the board and give oral testimony under oath;
- f. The applicant must submit documentation that he or she has completed, or will complete, prior to licensure in this state, continuing education equivalent to this state's requirements for the last full reporting biennium;
- g. The applicant must prove that he or she has never been convicted of, or pled nolo contendere to, regardless of adjudication, any felony or misdemeanor related to the practice of a health care profession in any jurisdiction;
- h. The applicant must successfully pass a written examination on the laws and rules of this state regulating the practice of dentistry and must successfully pass the computer-based diagnostic skills examination; and
- i. The applicant must submit documentation that he or she has successfully completed the National Board of Dental

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1276 Examiners dental examination.

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1299 1300 Section 21. Paragraph (b) of subsection (4) and paragraph (a) of subsection (6) of section 466.007, Florida Statutes, are amended to read:

466.007 Examination of dental hygienists.-

- (4) Effective July 1, 2012, to be licensed as a dental hygienist in this state, an applicant must successfully complete the following:
- A practical or clinical examination approved by the board. The examination shall be the Dental Hygiene Examination produced by the American Board of Dental Examiners, Inc. (ADEX) or its successor entity, if any, if the board finds that the successor entity's clinical examination meets or exceeds the provisions of this section. The board shall approve the ADEX Dental Hygiene Examination if the board has attained and continues to maintain representation on the ADEX House of Representatives, the ADEX Dental Hygiene Examination Development Committee, and such other ADEX Dental Hygiene committees as the board deems appropriate through rulemaking to ensure that the standards established in this section are maintained organizationally. The ADEX Dental Hygiene Examination or the examination produced by its successor entity is a comprehensive examination in which an applicant must demonstrate skills within the dental hygiene scope of practice on a live patient and any other components that the board deems necessary for the

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applicant to successfully demonstrate competency for the purpose of licensure. The ADEX Dental Hygiene Examination or the examination by the successor entity administered in this state shall be graded by dentists and dental hygienists licensed in this state who are employed by the department for this purpose.

(6)(a) A passing score on the ADEX Dental Hygiene Examination administered out of state shall be considered the same as a passing score for the ADEX Dental Hygiene Examination administered in this state and graded by licensed dentists and dental hygienists.

Section 22. Subsections (9) through (15) are added to section 466.017, Florida Statutes, to read:

466.017 Prescription of drugs; anesthesia.-

- (9) Any adverse incident that occurs in an office maintained by a dentist must be reported to the department. The required notification to the department must be submitted in writing by certified mail and postmarked within 48 hours after the incident occurs.
- (10) A dentist practicing in this state must notify the board in writing by certified mail within 48 hours of any mortality or other adverse incident that occurs in the dentist's outpatient facility. A complete written report must be filed with the board within 30 days after the mortality or other adverse incident.
  - (11) For purposes of notification to the department

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1326	pursuant to this section, the term "adverse incident" means any
1327	mortality that occurs during or as the result of a dental
1328	procedure, or an incident that results in the temporary or
1329	permanent physical or mental injury that requires
1330	hospitalization or emergency room treatment of a dental patient
1331	that occurred during or as a direct result of the use of general
1332	anesthesia, deep sedation, conscious sedation, pediatric
1333	conscious sedation, oral sedation, minimal sedation
1334	(anxiolysis), nitrous oxide, or local anesthesia.
1335	(12) Any certified registered dental hygienist
1336	administering local anesthesia must notify the board, in writing
1337	by registered mail within 48 hours of any adverse incident that
1338	was related to or the result of the administration of local
1339	anesthesia. A complete written report must be filed with the
1340	board within 30 days after the mortality or other adverse
1341	incident.
1342	(13) A failure by the dentist or dental hygienist to
1343	timely and completely comply with all the reporting requirements
1344	in this section is the basis for disciplinary action by the
1345	board pursuant to s. 466.028(1).
1346	(14) The department shall review each incident and
1347	determine whether it involved conduct by a health care
1348	professional subject to disciplinary action, in which case s.
1349	456.073 applies. Disciplinary action, if any, shall be taken by
1350	the board under which the health care professional is licensed.

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1331	(13) The board may adopt rules to administer this section.
L352	Section 23. <u>Sections 466.032, 466.033, 466.034, 466.035,</u>
L353	466.036, 466.037, 466.038, and 466.039, Florida Statutes, are
L354	repealed.
L355	Section 24. Subsection (1) of section 468.701, Florida
L356	Statutes, is amended to read:
L357	468.701 Definitions.—As used in this part, the term:
L358	(1) "Athletic trainer" means a person licensed under this
L359	part who has met the requirements under this part, including
L360	education requirements as set forth by the Commission on
L361	Accreditation of Athletic Training Education or its successor
L362	and necessary credentials from the Board of Certification. An
L363	athletic trainer must work within his or her scope of practice
L364	as established in the rules adopted by the board under s.
L365	468.705. An individual who is licensed as an athletic trainer
L366	may not otherwise provide, offer to provide, or represent that
L367	he or she is qualified to provide any care or services <u>beyond</u>
L368	his or her scope of practice, or that he or she lacks the
L369	education, training, or experience to provide, or that he or she
L370	is otherwise prohibited by law from providing.
L371	Section 25. Section 468.707, Florida Statutes, is amended
L372	to read:
L373	468.707 Licensure requirements.—Any person desiring to be
L374	licensed as an athletic trainer shall apply to the department on
L375	a form approved by the department. An applicant shall also

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provide records or other evidence, as determined by the board, to prove he or she has met the requirements of this section. The department shall license each applicant who:

(1) Has completed the application form and remitted the required fees.

- (2) For a person who applies on or after July 1, 2016, Has submitted to background screening pursuant to s. 456.0135. The board may require a background screening for an applicant whose license has expired or who is undergoing disciplinary action.
- (3) (a) Has obtained a baccalaureate or higher degree from a college or university professional athletic training degree program accredited by the Commission on Accreditation of Athletic Training Education or its successor recognized and approved by the United States Department of Education or the Commission on Recognition of Postsecondary Accreditation, approved by the board, or recognized by the Board of Certification, and has passed the national examination to be certified by the Board of Certification, or-
- (b) (4) Has obtained, at a minimum, a bachelor's degree and has completed the Board of Certification internship requirements and If graduated before 2004, has a current certification from the Board of Certification.
- $\underline{(4)}$  (5) Has current certification in both cardiopulmonary resuscitation and the use of an automated external defibrillator set forth in the continuing education requirements as determined

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1401	by the board pursuant to s. 468.711.
1402	(5)(6) Has completed any other requirements as determined
1403	by the department and approved by the board.
1404	Section 26. Subsection (3) of section 468.711, Florida
1405	Statutes, is amended to read:
1406	468.711 Renewal of license; continuing education
1407	(3) If initially licensed after January 1, 1998, the
1408	licensee must be currently certified by the Board of
1409	Certification or its successor agency and maintain that
1410	certification in good standing without lapse.
1411	Section 27. Subsection (2) of section 468.723, Florida
1412	Statutes, is amended to read:
1413	468.723 Exemptions.—This part does not prevent or
1414	restrict:
1415	(2) An athletic training student acting under the direct
1416	supervision of a licensed athletic trainer. For purposes of this
1417	subsection, "direct supervision" means the physical presence of
1418	an athletic trainer so that the athletic trainer is immediately
1419	available to the athletic training student and able to intervene
1420	on behalf of the athletic training student. The supervision must
1421	be in accordance with rules adopted by the board the standards

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Section 28. Subsections (1), (3), and (4) of section

set forth by the Commission on Accreditation of Athletic

CODING: Words stricken are deletions; words underlined are additions.

468.803, Florida Statutes, are amended to read:

Training Education or its successor.

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468.803 License, registration, and examination requirements.—

- (1) The department shall issue a license to practice orthotics, prosthetics, or pedorthics, or a registration for a resident to practice orthotics or prosthetics, to qualified applicants. Licenses shall be granted independently in orthotics, prosthetics, or pedorthics, but a person may be licensed in more than one such discipline, and a prosthetist-orthotist license may be granted to persons meeting the requirements for both a prosthetist and an orthotist license. Registrations shall be granted independently in orthotics or prosthetics, and a person may be registered in both fields at the same time or jointly in orthotics and prosthetics as a dual registration.
- (3) A person seeking to attain the required orthotics or prosthetics experience in this state must be approved by the board and registered as a resident by the department. Although a registration may be held in both practice fields, for independent registrations the board shall not approve a second registration until at least 1 year after the issuance of the first registration. Notwithstanding subsection (2), an applicant for independent registrations who has been approved by the board and registered by the department in one practice field may apply for registration in the second practice field without an additional state or national criminal history check during the

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period in which the first registration is valid. Each <a href="independent">independent</a> registration or dual registration is valid for 2 years from the date of issuance unless otherwise revoked by the department upon recommendation of the board. The board shall set a registration fee not to exceed \$500 to be paid by the applicant. A registration may be renewed once by the department upon recommendation of the board for a period no longer than 1 year, as such renewal is defined by the board by rule. The registration renewal fee shall not exceed one-half the current registration fee. To be considered by the board for approval of registration as a resident, the applicant must have:

- degree in Orthotics and Prosthetics from a regionally accredited college or university recognized by the Commission on Accreditation of Allied Health Education Programs or, at a minimum, a bachelor's degree from a regionally accredited college or university and a certificate in orthotics from a program recognized by the Commission on Accreditation of Allied Health Education Programs, or its equivalent, as determined by the board; or
- (b) A Bachelor of Science or higher-level postgraduate degree in Orthotics and Prosthetics from a regionally accredited college or university recognized by the Commission on Accreditation of Allied Health Education Programs or, at a minimum, a bachelor's degree from a regionally accredited

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college or university and a certificate in prosthetics from a program recognized by the Commission on Accreditation of Allied Health Education Programs, or its equivalent, as determined by the board; or

- (c) A Bachelor of Science or higher-level postgraduate degree in Orthotics and Prosthetics from a regionally accredited college or university recognized by the Commission on Accreditation of Allied Health Education Programs or, at a minimum, a bachelor's degree from a regionally accredited college or university and a dual certificate in both orthotics and prosthetics from programs recognized by the Commission on Accreditation of Allied Health Education Programs, or its equivalent, as determined by the board.
- examination for an orthotist or a prosthetist license, or the board may approve the existing examination of a national standards organization. The examination must be predicated on a minimum of a baccalaureate-level education and formalized specialized training in the appropriate field. Each examination must demonstrate a minimum level of competence in basic scientific knowledge, written problem solving, and practical clinical patient management. The board shall require an examination fee not to exceed the actual cost to the board in developing, administering, and approving the examination, which fee must be paid by the applicant. To be considered by the board

for examination, the applicant must have:

- (a) For an examination in orthotics:
- 1. A Bachelor of Science or higher-level postgraduate degree in Orthotics and Prosthetics from a regionally accredited college or university recognized by the Commission on Accreditation of Allied Health Education Programs or, at a minimum, a bachelor's degree from a regionally accredited college or university and a certificate in orthotics from a program recognized by the Commission on Accreditation of Allied Health Education Programs, or its equivalent, as determined by the board; and
- 2. An approved orthotics internship of 1 year of qualified experience, as determined by the board, or an orthotic residency program or dual residency program recognized by the board.
  - (b) For an examination in prosthetics:
- 1. A Bachelor of Science or higher-level postgraduate degree in Orthotics and Prosthetics from a regionally accredited college or university recognized by the Commission on Accreditation of Allied Health Education Programs or, at a minimum, a bachelor's degree from a regionally accredited college or university and a certificate in prosthetics from a program recognized by the Commission on Accreditation of Allied Health Education Programs, or its equivalent, as determined by the board; and
  - 2. An approved prosthetics internship of 1 year of

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L526	qualified experience, as determined by the board, or a
L527	prosthetic residency program or dual residency program
L528	recognized by the board.

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Section 29. Subsection (5) of section 480.033, Florida Statutes, is amended to read:

480.033 Definitions.—As used in this act:

(5) "Apprentice" means a person approved by the board to study colonic irrigation massage under the instruction of a licensed massage therapist practicing colonic irrigation.

Section 30. Subsections (1) and (2) of section 480.041, Florida Statutes, are amended, and subsection (8) is added to that section, to read:

480.041 Massage therapists; qualifications; licensure; endorsement.—

- (1) Any person is qualified for licensure as a massage therapist under this act who:
- (a) Is at least 18 years of age or has received a high school diploma or high school equivalency diploma;
- (b) Has completed a course of study at a board-approved massage school or has completed an apprenticeship program that meets standards adopted by the board; and
- (c) Has received a passing grade on <u>a national</u> an examination <u>designated</u> administered by the <u>board</u> department.
- (2) Every person desiring to be examined for licensure as a massage therapist shall apply to the department in writing

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upon forms prepared and furnished by the department. Such

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1552	applicants shall be subject to the provisions of s. $480.046(1)$ .
1553	Applicants may take an examination administered by the
1554	department only upon meeting the requirements of this section as
1555	determined by the board.
1556	(8) A person issued a license as a massage apprentice
1557	before July 1, 2018, may continue that apprenticeship and
1558	perform massage therapy as permitted under that license until it
1559	expires. Upon completion of the apprenticeship, before July 1,
1560	2021, a massage apprentice may apply to the board for full
1561	licensure and be granted a license if all other applicable
1562	licensure requirements are met.
1563	Section 31. Section 480.042, Florida Statutes, is
1564	repealed.

Section 32. Subsection (3) of section 480.046, Florida Statutes, is amended, and subsection (5) is added to that section, to read:

480.046 Grounds for disciplinary action by the board.-

- The board may shall have the power to revoke or suspend the license of a massage establishment licensed under this act, or to deny subsequent licensure of such an establishment, if the establishment is owned by an individual or entity who has a prior establishment license revoked, in either of the following cases:
  - (a) Upon proof that a license has been obtained by fraud

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1576 or misrepresentation.

- (b) Upon proof that the holder of a license is guilty of fraud or deceit or of gross negligence, incompetency, or misconduct in the operation of the establishment so licensed.
- (c) Upon proof that the owner of a massage establishment or any individual or individuals providing massage therapy services within the establishment, in the aggregate or individually, have had three convictions of, or pleas of guilty or nolo contendere to, or dismissals of a criminal action after a successful completion of a pretrial intervention, diversion, or substance abuse program for any misdemeanor or felony, regardless of adjudication, a crime in any jurisdiction related to prostitution and related acts as defined in s. 796.07, which occurred at or within the establishment.
- (5) An establishment may not apply for relicensure if disciplined under this section unless there is a change in ownership.
- Section 33. Section 483.824, Florida Statutes, is amended to read:
- 483.824 Qualifications of clinical laboratory director.—A clinical laboratory director must qualify as a clinical laboratory director according to Title 42, part 493, Code of Federal Regulations, must be a currently licensed laboratory director, have 4 years of clinical laboratory experience with 2 years of experience in the specialty to be directed or be

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nationally board certified in the specialty to be directed, and must meet one of the following requirements:

- (1) Be a physician licensed under chapter 458 or chapter 459;
- (2) Hold an earned doctoral degree in a chemical, physical, or biological science from a regionally accredited institution and maintain national certification requirements equal to those required by the <u>federal Centers for Medicare and Medicaid Services or the federal Health Care Financing Administration;</u> or
- (3) For the subspecialty of oral pathology, be a physician licensed under chapter 458 or chapter 459 or a dentist licensed under chapter 466. The laboratory director, if qualified, may perform the duties of the technical supervisor, clinical consultant, general supervisor, and testing personnel, or delegate these responsibilities to personnel meeting the qualifications under 42 C.F.R. ss. 493.1447, 493.1453, 493.1459, and 493.1487.
- Section 34. Subsection (3) of section 490.003, Florida Statutes, is amended to read:
- 1621 490.003 Definitions.—As used in this chapter:
- 1622 (3) (a) Prior to July 1, 1999, "doctoral-level

  1623 psychological education" and "doctoral degree in psychology"

  1624 mean a Psy.D., an Ed.D. in psychology, or a Ph.D. in psychology

  1625 from:

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1. An educational institution which, at the time the applicant was enrolled and graduated, had institutional accreditation from an agency recognized and approved by the United States Department of Education or was recognized as a member in good standing with the Association of Universities and Colleges of Canada; and

- 2. A psychology program within that educational institution which, at the time the applicant was enrolled and graduated, had programmatic accreditation from an accrediting agency recognized and approved by the United States Department of Education or was comparable to such programs.
- (b) Effective July 1, 1999, "doctoral-level psychological education" and "doctoral degree in psychology" mean a Psy.D., an Ed.D. in psychology, or a Ph.D. in psychology from:
- (a) 1. An educational institution which, at the time the applicant was enrolled and graduated, had institutional accreditation from an agency recognized and approved by the United States Department of Education or was recognized as a member in good standing with the Association of Universities and Colleges of Canada; and
- (b) 2. A psychology program within that educational institution which, at the time the applicant was enrolled and graduated, had programmatic accreditation from the American Psychological Association an agency recognized and approved by the United States Department of Education.

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Section 35. Paragraph (b) of subsection (1) and paragraph (b) of subsection (2) of section 490.005, Florida Statutes, are amended to read:

490.005 Licensure by examination.-

- (1) Any person desiring to be licensed as a psychologist shall apply to the department to take the licensure examination. The department shall license each applicant who the board certifies has:
- (b) Submitted proof satisfactory to the board that the applicant has:
- Received doctoral-level psychological education, as defined in s. 490.003(3);
- 2. Received the equivalent of a doctoral-level psychological education, as defined in s. 490.003(3), from a program at a school or university located outside the United States of America and Canada, which was officially recognized by the government of the country in which it is located as an institution or program to train students to practice professional psychology. The burden of establishing that the requirements of this provision have been met shall be upon the applicant;
- 3. Received and submitted to the board, prior to July 1, 1999, certification of an augmented doctoral-level psychological education from the program director of a doctoral-level psychology program accredited by a programmatic agency

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recognized and approved by the United States Department of Education; or

- 4. Received and submitted to the board, prior to August 31, 2001, certification of a doctoral-level program that at the time the applicant was enrolled and graduated maintained a standard of education and training comparable to the standard of training of programs accredited by a programmatic agency recognized and approved by the United States Department of Education. Such certification of comparability shall be provided by the program director of a doctoral-level psychology program accredited by a programmatic agency recognized and approved by the United States Department of Education.
- (2) Any person desiring to be licensed as a school psychologist shall apply to the department to take the licensure examination. The department shall license each applicant who the department certifies has:
- (b) Submitted satisfactory proof to the department that the applicant:
- 1. Has received a doctorate, specialist, or equivalent degree from a program primarily psychological in nature and has completed 60 semester hours or 90 quarter hours of graduate study, in areas related to school psychology as defined by rule of the department, from a college or university which at the time the applicant was enrolled and graduated was accredited by an accrediting agency recognized and approved by the Council for

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Higher Education Accreditation, its successor, Commission on Recognition of Postsecondary Accreditation or an institution which is publicly recognized as a member in good standing with the Association of Universities and Colleges of Canada.

- 2. Has had a minimum of 3 years of experience in school psychology, 2 years of which must be supervised by an individual who is a licensed school psychologist or who has otherwise qualified as a school psychologist supervisor, by education and experience, as set forth by rule of the department. A doctoral internship may be applied toward the supervision requirement.
- 3. Has passed an examination provided by the department. Section 36. Subsection (1) of section 490.006, Florida Statutes, is amended to read:
  - 490.006 Licensure by endorsement.-

- (1) The department shall license a person as a psychologist or school psychologist who, upon applying to the department and remitting the appropriate fee, demonstrates to the department or, in the case of psychologists, to the board that the applicant:
- (a) Holds a valid license or certificate in another state to practice psychology or school psychology, as applicable, provided that, when the applicant secured such license or certificate, the requirements were substantially equivalent to or more stringent than those set forth in this chapter at that time; and, if no Florida law existed at that time, then the

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requirements in the other state must have been substantially equivalent to or more stringent than those set forth in this chapter at the present time;

- (a) (b) Is a diplomate in good standing with the American Board of Professional Psychology, Inc.; or
- $\underline{\text{(b)}}$  Possesses a doctoral degree in psychology as described in s. 490.003 and has at least  $\underline{10}$  20 years of experience as a licensed psychologist in any jurisdiction or territory of the United States within 25 years preceding the date of application.

Section 37. Subsection (6) of section 491.0045, Florida Statutes, as amended by chapter 2016-80 and chapter 2016-241, Laws of Florida, is reenacted to read:

491.0045 Intern registration; requirements.-

(6) A registration issued on or before March 31, 2017, expires March 31, 2022, and may not be renewed or reissued. Any registration issued after March 31, 2017, expires 60 months after the date it is issued. The board may make a one-time exception from the requirements of this section in emergency or hardship cases, as defined by board rule, if A subsequent intern registration may not be issued unless the candidate has passed the theory and practice examination described in s.

491.005(1)(d), (3)(d), and (4)(d).

Section 38. Subsections (3) and (4) of section 491.005,

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CODING: Words stricken are deletions; words underlined are additions.

Florida Statutes, are amended to read:

491.005 Licensure by examination.

- (3) MARRIAGE AND FAMILY THERAPY.—Upon verification of documentation and payment of a fee not to exceed \$200, as set by board rule, plus the actual cost to the department for the purchase of the examination from the Association of Marital and Family Therapy Regulatory Board, or similar national organization, the department shall issue a license as a marriage and family therapist to an applicant who the board certifies:
- (a) Has submitted an application and paid the appropriate fee.
- (b) 1. Has a minimum of a master's degree with major emphasis in marriage and family therapy from a program accredited by the Commission of Accreditation for Marriage and Family Therapy Education or from a Florida university program accredited by the Council for Accreditation of Counseling and Related Educational Programs, or a closely related field, and graduate courses approved by the Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling. has completed all of the following requirements:
- a. Thirty-six semester hours or 48 quarter hours of graduate coursework, which must include a minimum of 3 semester hours or 4 quarter hours of graduate-level course credits in each of the following nine areas: dynamics of marriage and family systems; marriage therapy and counseling theory and techniques; family therapy and counseling theory and techniques;

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individual human development theories throughout the life cycle; personality theory or general counseling theory and techniques; psychopathology; human sexuality theory and counseling techniques; psychosocial theory; and substance abuse theory and counseling techniques. Courses in research, evaluation, appraisal, assessment, or testing theories and procedures; thesis or dissertation work; or practicums, internships, or fieldwork may not be applied toward this requirement.

b. A minimum of one graduate-level course of 3 semester hours or 4 quarter hours in legal, ethical, and professional standards issues in the practice of marriage and family therapy or a course determined by the board to be equivalent.

c. A minimum of one graduate-level course of 3 semester hours or 4 quarter hours in diagnosis, appraisal, assessment, and testing for individual or interpersonal disorder or dysfunction; and a minimum of one 3-semester-hour or 4-quarter-hour graduate-level course in behavioral research which focuses on the interpretation and application of research data as it applies to clinical practice. Credit for thesis or dissertation work, practicums, internships, or fieldwork may not be applied toward this requirement.

d. A minimum of one supervised clinical practicum, internship, or field experience in a marriage and family counseling setting, during which the student provided 180 direct client contact hours of marriage and family therapy services

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under the supervision of an individual who met the requirements for supervision under paragraph (c). This requirement may be met by a supervised practice experience which took place outside the academic arena, but which is certified as equivalent to a graduate-level practicum or internship program which required a minimum of 180 direct client contact hours of marriage and family therapy services currently offered within an academic program of a college or university accredited by an accrediting agency approved by the United States Department of Education, an institution which is publicly recognized as a member standing with the Association of Universities and Colleges of Canada or a training institution accredited by the Commission on Accreditation for Marriage and Family Therapy Education recognized by the United States Department of Education. Certification shall be required from an official of such college, university, or training institution.

2. If the course title which appears on the applicant's transcript does not clearly identify the content of the coursework, the applicant shall be required to provide additional documentation, including, but not limited to, a syllabus or catalog description published for the course.

The required master's degree must have been received in an institution of higher education which at the time the applicant

graduated was: fully accredited by a regional accrediting body

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recognized by the Commission on Recognition of Postsecondary Accreditation; publicly recognized as a member in good standing with the Association of Universities and Colleges of Canada; or an institution of higher education located outside the United States and Canada, which at the time the applicant was enrolled and at the time the applicant graduated maintained a standard of training substantially equivalent to the standards of training of those institutions in the United States which are accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation. Such foreign education and training must have been received in an institution or program of higher education officially recognized by the government of the country in which it is located as an institution or program to train students to practice as professional marriage and family therapists or psychotherapists. The burden of establishing that the requirements of this provision have been met shall be upon the applicant, and the board shall require documentation, such as, but not limited to, an evaluation by a foreign equivalency determination service, as evidence that the applicant's graduate degree program and education were equivalent to an accredited program in this country. An applicant with a master's degree from a program which did not emphasize marriage and family therapy may complete the coursework requirement in a training institution fully accredited by the Commission on Accreditation for Marriage and

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Family Therapy Education recognized by the United States Department of Education.

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Has had at least 2 years of clinical experience during which 50 percent of the applicant's clients were receiving marriage and family therapy services, which must be at the postmaster's level under the supervision of a licensed marriage and family therapist with at least 5 years of experience, or the equivalent, who is a qualified supervisor as determined by the board. An individual who intends to practice in Florida to satisfy the clinical experience requirements must register pursuant to s. 491.0045 before commencing practice. If a graduate has a master's degree with a major emphasis in marriage and family therapy or a closely related field that did not include all the coursework required under subparagraph (b) 1. sub-subparagraphs (b)1.a.-c., credit for the post-master's level clinical experience shall not commence until the applicant has completed a minimum of 10 of the courses required under subparagraph (b) 1. sub-subparagraphs (b) 1.a.-c., as determined by the board, and at least 6 semester hours or 9 quarter hours of the course credits must have been completed in the area of marriage and family systems, theories, or techniques. Within the 2 3 years of required experience, the applicant shall provide direct individual, group, or family therapy and counseling, to include the following categories of cases: unmarried dyads, married couples, separating and divorcing couples, and family

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groups including children. A doctoral internship may be applied toward the clinical experience requirement. A licensed mental health professional must be on the premises when clinical services are provided by a registered intern in a private practice setting.

- (d) Has passed a theory and practice examination provided by the department for this purpose.
- (e) Has demonstrated, in a manner designated by rule of the board, knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling.
- (f) For the purposes of dual licensure, the department shall license as a marriage and family therapist any person who meets the requirements of s. 491.0057. Fees for dual licensure shall not exceed those stated in this subsection.
- (4) MENTAL HEALTH COUNSELING.—Upon verification of documentation and payment of a fee not to exceed \$200, as set by board rule, plus the actual per applicant cost to the department for purchase of the examination from the National Board of Certified Counselors or its successor Professional Examination Service for the National Academy of Certified Clinical Mental Health Counselors or a similar national organization, the department shall issue a license as a mental health counselor to an applicant who the board certifies:
  - (a) Has submitted an application and paid the appropriate

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1901 fee.

- (b)1. Has a minimum of an earned master's degree from a mental health counseling program accredited by the Council for the Accreditation of Counseling and Related Educational Programs that consists of at least 60 semester hours or 80 quarter hours of clinical and didactic instruction, including a course in human sexuality and a course in substance abuse. If the master's degree is earned from a program related to the practice of mental health counseling that is not accredited by the Council for the Accreditation of Counseling and Related Educational Programs, then the coursework and practicum, internship, or fieldwork must consist of at least 60 semester hours or 80 quarter hours and meet the following requirements:
- a. Thirty-three semester hours or 44 quarter hours of graduate coursework, which must include a minimum of 3 semester hours or 4 quarter hours of graduate-level coursework in each of the following 11 content areas: counseling theories and practice; human growth and development; diagnosis and treatment of psychopathology; human sexuality; group theories and practice; individual evaluation and assessment; career and lifestyle assessment; research and program evaluation; social and cultural foundations; counseling in community settings; and substance abuse. Courses in research, thesis or dissertation work, practicums, internships, or fieldwork may not be applied toward this requirement.

b. A minimum of 3 semester hours or 4 quarter hours of graduate-level coursework in legal, ethical, and professional standards issues in the practice of mental health counseling, which includes goals, objectives, and practices of professional counseling organizations, codes of ethics, legal considerations, standards of preparation, certifications and licensing, and the role identity and professional obligations of mental health counselors. Courses in research, thesis or dissertation work, practicums, internships, or fieldwork may not be applied toward this requirement.

- c. The equivalent, as determined by the board, of at least 700 1,000 hours of university-sponsored supervised clinical practicum, internship, or field experience as required in the accrediting standards of the Council for Accreditation of Counseling and Related Educational Programs for mental health counseling programs. This experience may not be used to satisfy the post-master's clinical experience requirement.
- 2. If the course title which appears on the applicant's transcript does not clearly identify the content of the coursework, the applicant shall be required to provide additional documentation, including, but not limited to, a syllabus or catalog description published for the course.

Education and training in mental health counseling must have been received in an institution of higher education which at the

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time the applicant graduated was: fully accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation; publicly recognized as a member in good standing with the Association of Universities and Colleges of Canada; or an institution of higher education located outside the United States and Canada, which at the time the applicant was enrolled and at the time the applicant graduated maintained a standard of training substantially equivalent to the standards of training of those institutions in the United States which are accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation. Such foreign education and training must have been received in an institution or program of higher education officially recognized by the government of the country in which it is located as an institution or program to train students to practice as mental health counselors. The burden of establishing that the requirements of this provision have been met shall be upon the applicant, and the board shall require documentation, such as, but not limited to, an evaluation by a foreign equivalency determination service, as evidence that the applicant's graduate degree program and education were equivalent to an accredited program in this country.

(c) Has had at least 2 years of clinical experience in mental health counseling, which must be at the post-master's level under the supervision of a licensed mental health

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counselor or the equivalent who is a qualified supervisor as determined by the board. An individual who intends to practice in Florida to satisfy the clinical experience requirements must register pursuant to s. 491.0045 before commencing practice. If a graduate has a master's degree with a major related to the practice of mental health counseling that did not include all the coursework required under sub-subparagraphs (b) 1.a.-b., credit for the post-master's level clinical experience shall not commence until the applicant has completed a minimum of seven of the courses required under sub-subparagraphs (b) 1.a.-b., as determined by the board, one of which must be a course in psychopathology or abnormal psychology. A doctoral internship may be applied toward the clinical experience requirement. A licensed mental health professional must be on the premises when clinical services are provided by a registered intern in a private practice setting.

- (d) Has passed a theory and practice examination provided by the department for this purpose.
- (e) Has demonstrated, in a manner designated by rule of the board, knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling.
- Section 39. Paragraph (b) of subsection (1) of section 491.006, Florida Statutes, is amended to read:
  - 491.006 Licensure or certification by endorsement.—

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(1) The department shall license or grant a certificate to a person in a profession regulated by this chapter who, upon applying to the department and remitting the appropriate fee, demonstrates to the board that he or she:

- (b)1. Holds an active valid license to practice and has actively practiced the profession for which licensure is applied in another state for 3 of the last 5 years immediately preceding licensure.
- 2. Meets the education requirements of this chapter for the profession for which licensure is applied.
- 2.3. Has passed a substantially equivalent licensing examination in another state or has passed the licensure examination in this state in the profession for which the applicant seeks licensure.
- 3.4. Holds a license in good standing, is not under investigation for an act that would constitute a violation of this chapter, and has not been found to have committed any act that would constitute a violation of this chapter. The fees paid by any applicant for certification as a master social worker under this section are nonrefundable.
- Section 40. Subsection (3) of section 491.007, Florida Statutes, is amended to read:
  - 491.007 Renewal of license, registration, or certificate.-
- (3) The board or department shall prescribe by rule a method for the biennial renewal of an intern registration at a

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2026 fee set by rule, not to exceed \$100.

Section 41. Subsection (2) of section 491.009, Florida Statutes, is amended to read:

491.009 Discipline.-

(2) The <u>board</u> department, or, in the case of <u>certified</u> master social workers <u>psychologists</u>, the <u>department</u> <del>board</del>, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1).

Section 42. Subsection (3) of section 463.0057, Florida Statutes, is amended to read:

463.0057 Optometric faculty certificate.-

(3) The holder of a faculty certificate may engage in the practice of optometry as permitted by this section but may not administer or prescribe topical ocular pharmaceutical agents unless the certificateholder has satisfied the requirements of  $\frac{1}{100} \cdot \frac{1}{100} \cdot$ 

Section 43. Paragraph (c) of subsection (2) of section 491.0046, Florida Statutes, is amended to read:

491.0046 Provisional license; requirements.-

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(2) The department shall issue a provisional clinical social worker license, provisional marriage and family therapist license, or provisional mental health counselor license to each applicant who the board certifies has:

- (c) Has met the following minimum coursework requirements:
- 1. For clinical social work, a minimum of 15 semester hours or 22 quarter hours of the coursework required by s. 491.005(1)(b)2.b.
- 2. For marriage and family therapy, 10 of the courses required by  $\underline{s.\ 491.005(3)(b)1.}\ \underline{s.\ 491.005(3)(b)1.a.-c.}$ , as determined by the board, and at least 6 semester hours or 9 quarter hours of the course credits must have been completed in the area of marriage and family systems, theories, or techniques.
- 3. For mental health counseling, a minimum of seven of the courses required under <u>s. 491.005(3)(b)1.</u> <u>s. 491.005(4)(b)1.a.-</u> c.

Section 44. Subsection (11) of section 945.42, Florida Statutes, is amended to read:

945.42 Definitions; ss. 945.40-945.49.—As used in ss. 945.40-945.49, the following terms shall have the meanings ascribed to them, unless the context shall clearly indicate otherwise:

(11) "Psychological professional" means a behavioral practitioner who has an approved doctoral degree in psychology

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2076	as defined in $s. 490.003(3)$ $s. 490.003(3)(b)$ and is employed by
2077	the department or who is licensed as a psychologist pursuant to
2078	chapter 490.

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Section 45. This act shall take effect July 1, 2018.

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